

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:  
403372179

Date Received:  
04/13/2023

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

OGCC Operator Number: 16700

Name of Operator: CHEVRON USA INC

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) Fax: ( )

Email: \_\_\_\_\_

#### Additional Operator Contact:

Contact Name	Phone	Email
<u>Regulatory, Rangely</u>		<u>RangelyRegulatory@scoutep.com</u>
<u>Kellerby, Shaun</u>	<u>(970) 712-1248</u>	<u>shaun.kellerby@state.co.us</u>
<u>Patterson, Chris</u>		<u>Chris.Patterson@scoutep.com</u>
<u>Sanford, Anita</u>	<u>(970) 551-8313</u>	<u>Anita.Sanford@scoutep.com</u>

### COGCC INSPECTION SUMMARY:

FIR Document Number: 702501092

Inspection Date: 04/05/2023

FIR Submit Date: 04/05/2023

FIR Status: \_\_\_\_\_

#### Inspected Operator Information:

Company Name: CHEVRON USA INC

Company Number: 16700

Address: 760 HORIZON DRIVE STE 401

City: GRAND JUNCTION State: CO Zip: 81506

#### LOCATION - Location ID: 315321

Location Name: A.C. MCLAUGHLIN-62N103W Number: 13SESE County: RIO BLANCO

Qtrqr: SESE Sec: 13 Twp: 2N Range: 103W Meridian: 6

Latitude: 40.136410 Longitude: -108.900080

#### FACILITY - API Number: 05-103- -00

Facility ID: 230629

Facility Name: A.C. MCLAUGHLIN Number: 71X

Qtrqr: SESE Sec: 13 Twp: 2N Range: 103W Meridian: 6

Latitude: 40.136410 Longitude: -108.900080

### CORRECTIVE ACTIONS:

1 CA# 169064

Corrective Action: Provide proper BMPs to prevent sediment migration from location and lease road.

Date: 04/21/2023

Response: CA COMPLETED

Date of Completion: 04/12/2023

Location and Road have been repaired. Refer to attached pictures.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC  
Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: \_\_\_\_\_

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Anita Sanford

Signed: \_\_\_\_\_

Title: Regulatory Analyst

Date: 4/13/2023 7:14:57 AM

**ATTACHMENT LIST**

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
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403372181	Pictures
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Total Attach: 1 Files